

STATE PLAN UNDER TITLE XIX OF THE SOCIAL SECURITY ACT
State WASHINGTON

(B) the residual of the remaining balance in the federal allotment for state disproportionate share adjustment payments for the fiscal year, after subtraction from the federal allotment, (i), the initial installment payments paid under a. above and, (ii), disproportionate share payments made under terms of Part I of this plan attachment. In the event the final installment adjustment payment is limited by the residual of the federal allotment, the payment will be apportioned between the facilities based on the ratio of the facilities' initial installment payment.

F. CUSTOMARY CHARGE PAYMENT LIMITS

As required by 42 CFR 447.271(a) total Medicaid payments to each hospital for inpatient hospital services to Medicaid recipients shall not exceed the hospital's customary charges to the general public for the services. The state may recoup amounts of total Medicaid payments in excess of such charges.

As permitted by 42 CFR 447.271(b) customary charge limitations will not apply to public providers who provide services at a nominal charge.

G. ADMINISTRATIVE POLICIES1. Provider Appeal Procedures

State psychiatric hospitals appeal all Medicare cost controversies within applicable Medicare appeal procedures. All results of these appeals will be processed within the Medicaid reimbursement method as provided under Retrospective Cost Reimbursement Method above.

2. Uniform Cost Reporting Requirements

State psychiatric hospitals are required to complete and submit a copy of their annual Medicare cost reports (HCFA 2552). In addition, these hospitals are required to submit other financial information as required by the MHD.

3. Financial Audit Requirements

State psychiatric hospital Medicare cost reports and accounting records are subject to audit by; (i) the Medicare Intermediary, (ii) the Washington State Auditor, and (iii) the Internal Auditor of the Department.